

Application #

Must be owner/occupier or licensed contractor. Address, company name & phone must match information on license.

Harnett County Central Permitting
420 McKinney Pkwy Lillington, NC 27546
PO Box 65 Lillington, NC 27546
910-893-7525 ext. 1 Fax 910-893-2793 www.hamett.org/permits

Application for Residential Building and I	rades Permit	
Owner's Name: Gary and Lounora Pop	eDate 9 - 19.22	
Site Address: 1002 Warren Road Erwin 28339 Phone 910 984-6292		
Subdivision:	Lot	
Description of Proposed Work: Construct single family nome Total Job Cost \$ 203,142.00		
General Contractor Information		
K&D Builders Inc of Stedman	910 818-5602	
Building Contractor's Company Name	Telephone	
3916 Barnsdale Dr Wade NC 28395 Address	Cfowler 730 Dembargmail, com Email Address	
License # HEATED SQ FT 1401 GARAGE S	QFT 822	
Electrical Contractor Information		
Description of Work In Stall wiring & fixtures Service Size:	<u>ADD_</u> Amps T-Pole: <u>V_</u> YesNo	
Tarneel Pride Electric Corp	910 584-800b Telephone	
Electrical Contractor's Company Name		
POBOX 458 Stedman NC 28391	thpelectric Od eyahoo, com	
Address	Email Address	
22985-L		
License # Mechanical/HVAC Contractor Information		
Description of Work InStall HVAC and gas line		
Foust Heating & Air Conditioning Inc Mechanical Contractor's Company Name	910 323-0587 Telephone	
2976 Dunn Rd Eastwer NC 28312	Mike @ foustair. com	
Address	Email Address	
17439 #2-43		
License #		
Plumbing Contractor Information		
Description of Work Install plumbing lines & fixtures	# Baths	
Dell Haire Plumbing	910429-9929	
Plumbing Contractor's Company Name	Telephone	
POBOX 65048 Fayetteville NC28306	Vickie Beard e hotmail, com	
Address	Email Address	
32886 Pl		
License #	그 아이는 아마다 가는 사람들이 되었다.	
Stornaway Construction Insulation Division 910 988-4070		
Stornaway Construction In Sulation UVIS	Telephone	
Insulation Contractor's Company Name & Address	relebuotie	
PO BOX 669 Hope Mills, NC 28348		

*NOTE: General Contractor / owner must fill out and sign the second page of this application.



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that by signing below I have obtained all subcontractors permission to obtain these permits and if any changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation

Affidavit for Worker's	Compensation N.C.G.S. 87-14
The undersigned applicant being the:	· Kennya yang
General Contractor Owner _	Officer/Agent of the Contractor or Owner
Do hereby confirm under penalties of perjury that set forth in the permit:	the person(s), firm(s) or corporation(s) performing the work
Has three (3) or more employees and has	obtained workers' compensation insurance to cover them.
Has one (1) or more subcontractors(s) and them.	d has obtained workers' compensation insurance to cover
Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.	
Has no more than two (2) employees and	no subcontractors.
Department issuing the permit may require certific	t is sought it is understood that the Central Permitting cates of coverage of worker's compensation insurance prior he permitted work from any person, firm or corporation
Sign w/Title: Karen Forder / Pr	esident Dalo: 9-19-22